

Small Entity Statement, which is: <input checked="" type="checkbox"/> Unsigned; <input type="checkbox"/> Newly signed for this application; <input type="checkbox"/> A copy from prior application [SERIAL NO.] and such small entity status is still proper and desired.	1 page
Preliminary Amendment	[**] pages
IDS	[**] pages
Form PTO 1449	[**] pages
Cited References	[**] references
Recordation Form Cover Sheet and Assignment	[**] pages
Assignee's Statement	[**] pages
English Translation	[**] pages
Certified Copy of Priority Document	[**] pages
Return Receipt Postcard	1
FILING FEES:	
Basic Filing Fee: \$355	\$355.00
Excess Claims Fee: 44 -20 x \$9.00	\$180.00
Excess Independent Claims Fee: 3 -3 x \$40.00	\$0.00
Multiple Dependent Claims Fee: \$135.00	\$0.00
Total Fees:	\$535.00
<input checked="" type="checkbox"/> Enclosed is a check for \$535.00 to cover the total fees. <input type="checkbox"/> Charge [**AMOUNT**] to Deposit Account No. 03-2095 to cover the total fees. <input type="checkbox"/> The filing fee is not being paid at this time. <input checked="" type="checkbox"/> Please apply any additional charges or any credits, to Deposit Account No. 03-2095.	
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October 29, 2000 Date	